239897

## AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS **⊠** ILEC [ ] Wireless

1	CEDTICIO ATER COM			
1.	CERTIFICATED COMPANY INFORMATION  Velocity, The Greatest Phone Company Ever, Inc.			
	Company Name			
_				
	Oba/fka			
-	7130 Spring Meadows Dr W			
ŀ	Mailing Address Holland, OH 43528			
ć	ity, State, Zip Code			
_	130 Spring Meadows Dr W			
מ	Jsiness Location			
_	olland, OH 43528			
ار	ty, State, Zip Code <u>Lucas</u> County			
	REGISTERED AGENT INFORMATION			
(e	gistered Agent: Incorp Services, Inc			
1a	iling Address: 317 Ruth Visa			
<u>.</u>	xington, SC 29073			
Ity	, State, Zip Code			
a	nt to the Commission's rules and regulations, print or type company contact for the following william Werner			
	William Werner Sylve Company contact for the following			
	General Manager (Include Address if different than above)			
	CECUDORE NUMBER / C : 11 to			
	same / E-mail Address			
	Same Customer Relations/Complaints Representative (Include Address if the			
	Same / E-mail Address  Customer Relations/Complaints Representative (Include Address if different than above)  Same / Same / Same			
	Customer Relations/Complaints Representative (Include Address if different than above)  Same / same / same  Telephone Number / Facsimile Number / E-mail Address			
	Customer Relations/Complaints Representative (Include Address if different than above)  Same / same / same  Telephone Number / Facsimile Number / E-mail Address			
	Customer Relations/Complaints Representative (Include Address if different than above)  Same / same / same  Telephone Number / Facsimile Number / E-mail Address  Same  Customer Relations/Complaints Representative for Escalated Complaints (Include Address if different than above)			
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	Customer Relations/Complaints Representative (Include Address if different than above)  same /same /same  Telephone Number / Facsimile Number / E-mail Address  Same  Customer Relations/Complaints Representative for Escalated Complaints (Include Address i different than above)  same /same /same /same  Telephone Number / Facsimile Number / E-mail Address  Customer Contact (Toll Free Number)			
	Customer Relations/Complaints Representative (Include Address if different than above)  same /same /same  Telephone Number / Facsimile Number / E-mail Address  Same  Customer Relations/Complaints Representative for Escalated Complaints (Include Address i different than above)  same /same /same /same  Telephone Number / Facsimile Number / E-mail Address  Customer Contact (Toll Free Number)  Same			
	Customer Relations/Complaints Representative (Include Address if different than above)  same			
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	Customer Relations/Complaints Representative (Include Address if different than above)			
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In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:

William Werner				
Regulatory Officer	Regulatory Officer (Include Address if different than above)			
419-868-9983	/419-868-9986	/ Chip@velocity.ora		
Telephone Number		/ E-mail Address		
7130 Spring Mea	adows Dr W, Holland	, OH 43528		
Dual Party Mailings				
Susan Cockerha				
(Mailing Address)				
678) 672-2837	/ 678) 672-2837	/ scockerham@fastekteam.com		
Telephone Number	/ Facsimile Number	/ E-mail Address		
1725 Windward	Concourse, Suite 150	0, Alpharetta, GA 30005		
Interim LEC Fund Mailings (Name)				
Same				
(Mailing Address)				
Same	/ Same	/ Same		
Telephone Number	/ Facsimile Number	/ E-mail Address		
Same				
Universal Service Fund Mailings (Name)				
Same				
(Mailing Address)				
Same	/ Same	/ Same		
Telephone Number	/ Facsimile Number	/ E-mail Address		
Same				
Gross Receipts Mailings (Name)				
Same				
(Mailing Address)				
Same	/ Same			
Telephone Number	/ Facsimile Number	/ E-mail Address		
Same				
Lifeline Mailings (Name)				
Same				
(Mailing Address)				
Same		/		
Telephone Number	/ Facsimile Number	/ E-mail Address		
Gregory Kiley		Simple To The Control of the Control		
This form was con	npleted by	Signature / \		
President/CEO		/ 10/19/2012/		
Title		Date		

RETURN COMPLETED FORM TO:

Public Service Commission of SC

**Docketing Department**Post Office Drawer 11649
Columbia, South Carolina 29211

And
Office of Regulatory Staff
Attn: Jeanne Gordon
1401 Main Street, Suite 900
Columbia, South Carolina 29201